								Application of Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									10/	Z	110	58	
CLAIMS AS FILED - PART I									ENTITY		OTHER	THAN	
(Column 1) (Column 2							T\	/PE	<u> </u>	QR	SMALL	ENTITY	
TOTAL CLAIMS								RATE			RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		B.	ASIC FE	3 <b>3</b> 5.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			25 minus 20=		: 5			X\$ 9=		OR	X\$18=	90	
INC	PEPENDENT CI	LAIMS `	minus 3 =					X4 <b>%</b> =		OR	X8 <b>6</b> =	86	
MU	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+135=		OR	+270=		
• If	the difference	in column 1 is	less than zero, enter "0" in column 2			<u>L</u>	TOTAL	· · · · · ·	OR	TOTAL	946		
CLAIMS AS AMENDED - PART II											OTHER		
		(Column 1)		(Colu	_	(Column 3)	· ·	SMALL	ENTITY	OR	SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MOZ	Total	•	Minus	**		П		X\$ 9=		OR	X\$18=		
AMENDME	Independent	*	Minus	***		=		X4 <b>3</b> =		OR	X8 <b>6</b> =	-	
Ĺ	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	PENDENT	CLAIM		١ [	+135=		OR	+270=		
								TOTA			TOTAL	•	
			DIT. FE	E		ADDIT. FEE							
_		(Column 1) CLAIMS		(Colui HIGH NUM	IEST	(Column 3)	Ιг	·	ADDI-			ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	: X\$18=		
	Independent	*	Minus	***		=		X4 <b>B</b> =		OR	X8 <b>6</b> =		
	FIRST PRESE	NTATION OF MU	JETIPLE DEF	ENDEN	CLAIM			<b>⊦135</b> =		OR	+270=		
							L_ 40	TOTA DIT. FEI		OR	TOTAL ADDIT. FEE		
		AU	טוו. רבו			ADDII. 1 22							
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colui HIGH NUM PREVIO PAID	IEST BER' DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	44		=		X\$ 9=	,	OR	X\$18=		
	Independent	•	Minus	***		=		X40=		OR	X80=		
A	FIRST PRESE	JLTIPLE DEF	PENDENT	CLAIM	CLAIM		**						
			a parker to the		MAP In	hamm O	Ľ	<b>-135</b> =		OR	+270=		
••• [	the entry in column the Highest Number 1	" AD	TOTAL DIT. FEI	<u>-</u>	OR	TOTAL ADDIT. FEE							
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											lumn_1	. <u>.</u>	